

An Independent Licensee of the Blue Cross and Blue Shield Association

October 30, 2009

Dear Physician:

We value the working relationship we have with HMSA participating physicians, and are asking for your support at a critical time.

State, city and county employees who are covered by the Hawaii Employer-Union Health Benefits Trust Fund (EUTF) will be undergoing an open enrollment period Nov. 2 through Nov. 30. This includes all members of the Hawaii Government Employees Association (HGEA), University of Hawaii Professional Assembly (UHPA), United Public Workers (UPW), Hawaii Fire Fighters Association, and the State of Hawaii Organization of Police Officers (SHOPO).

Currently, 65,000 EUTF members (coverage code 562) are enrolled in HMSA's PPO plan. During open enrollment, these members must select HMSA's 80/20 PPO plan to retain their HMSA coverage. If they do not actively choose HMSA, they will automatically be assigned to the HMA/Summerlin 90/10 PPO plan.

Why is this important to physicians?

We believe that a patient's plan – and the company behind that plan – does matter to doctors. The right plan brings operational efficiencies to your office, such as quick and accurate claims payment and the cash flow that is vital in this economy.

Some quick stats:

- 99.3% of HMSA claims are processed in 30 days* (industry standard is 97%)
- 98.4% of HMSA claims are processed accurately (industry standard is 97%)
- 99.5% of HMSA claim dollars are paid accurately (industry standard is 99%)

We encourage you to compare whether HMA/Summerlin delivers this level of service to you.

If your patients are automatically enrolled in HMA, this may result in lower reimbursements from HMA/Summerlin compared to what HMSA provides. If you, as a physician, are satisfied with HMSA and its level of payment, claims processing and provider servicing support, please encourage your patients who are state and county employees to select HMSA during their open enrollment. If they take no action, they will be assigned to the other health plan.

If you have questions, please call HMSA's Provider Teleservice staff at 948-6330 on Oahu or 1 (800) 790-4672 from the Neighbor Islands.

During these tough economic times, it makes sense to have a solid patient base associated with a health plan that you know and trust. Encourage your patients to Choose HMSA. Thank you for your support.

Sincerely,

Paul K. Schnur

Vice President, Provider Services & Contracting

^{*} Third quarter July-August 2009 BCBSA Member Touchpoint Measures

Highlights of the EUTF PPO 80/20 Plan

Administered by HMSA

This plan offers all the advantages of a PPO, with lower monthly dues. See plan highlights to the right, with affordable copayments and 100 percent coverage for preventive care.

Benefit Description	Benefit Level/ Member Copayment
Annual deductible	No annual deductible
Hospital deductible	No hospital deductible
Physician services	Model Section (1988)
Office visit	\$14 copayment
Hospital visit	\$20 copayment
Emergency room visit	\$20 copayment
Mental health inpatient visit	\$20 copayment
Substance abuse inpatient visit	\$20 copayment
Physical exams	\$0 copayment
Well-child care immunizations	\$0 copayment
Well-child care lab tests	\$0 copayment
Well-child care physician office visits	\$0 copayment
Outpatient lab tests	\$0 copayment
Hospital services: Emergency room visit	\$100 copayment
Preventive care services	\$0 copayment
Standard health screenings	S0 copayment
HealthPass assessment	\$0 copayment
HealthPass referred screenings	\$0 copayment
Disease management services	\$0 copayment
Hospice services	\$0 copayment
Prostate test (PSA)	\$0 copayment
Chlamydia screening	\$0 copayment
Mammograms	\$0 copayment
Pap smears (routine)	\$0 copayment
Well-woman exam	\$0 copayment

As of October 2009

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For detailed benefit information, please refer to your Guide to Benefits.

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